Uni	PAT	Reduction Act of	MIION	persons are requ I FEE DETE Ite for Form PT	KMINAHO	a concritor of the	ormation unle	ss it displa	EPARTMENT OF ys a valid OMB of ion or Ducket Nu	control numb	
-		CLAIMS AS	בוו בט	DADTI						L1_10	
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL	ENTITY	OK	OTHER THAN SMALL ENTITY		
FOR NUMBER FILED NUMBER EXTRA					RATE	555	1				
BASIC FEE 37 CFR 1.16(a))					RAIE	FEE	1	RATE	FEE		
TOTAL CLAIMS						S	OR		S.		
37 CFR 1.16(c)) minus 20 =			x s =	<u> </u>	OR	X S =					
7 C	FR 1.16(b))		minus 3	= '		x \$=		OR	x s =		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ 5=		OR	+ \$ =		
íŧr	e adlerence in c	Olunin 1 is less tha	ın zerü, er	ger a in comun	Z.	101AL	<u>.</u> _	l Ok	TOTAL		
	٠.	minis AS mini	eividi. İ	FART d				-			
	15 61								OTUC	THAN	
7	13-04	(Column 1) CLAIMS	1	(Column 2) HIGHEST	(Column 3)	SMALL	ENTITY	OR OTHER T			
۲		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI-		RATE	ADDI-	
		AMENDMENT		PAID FOR	EXIIO.		TIONAL FEE			TIONA FEE	
	Total (37 CFR 1.16(c))	9	Minus	"20	2	x s =		OR	x s =		
	Independent (37 CFR 1,16(b))	· 2	Minus	3	-	x.s_ =		OR	x s =		
أأ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$ =		OR			
						TOTAL		1	+s= TOTAL		
_	/3. AS	<u> </u>				ADD'L FEE	L	OR	ADO'L FEE		
1	/3 - 05 (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						1				
3		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI	
انِ	Total	AMENDMENT	Minus	PAID FOR	.=		FEE			TIONA FEE	
	(37 CFR 1.16(c))	_ 7		20		x \$=		OR	x \$=		
	(37 CFR 1.16(b))	2_	Minus		-	x s=		OR	x s=		
	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDE	ENT CLAIM (37 CF	FR 1.16(d))	\ +s =		OR	+5 =		
						TOTAL ADD'L FEE		OR	TOTAL		
λ	-11-05			(0.1		NOUC FEE	L	JUR	AUU'L FEE	L	
Ť	11.03	(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)			1	f		
2		REMAINING AFTER	·	NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI TIONA	
1	Total	AMENDMENT .	Minus	PAID FOR			FEE	1		FEE	
	(37 CFR 1.16(c))	<u> </u>		<u> 20</u>		x s=		OR	x s=		
	(37 CFR 1.16(b))	2_	Minus	3	=	x s=	·	OR	x s=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s=		OR	+ s =		
						TOTAL ADD'L FEE		1	TOTAL		
				y in column 2, writ			L	OR	ADD'L FEE	L	

The Trighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.





PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number								
09	491467							

CLAIMS AS FILED - PART I (Column 1) (Column 2)					_	SMALL ENTITY TYPE		OR	OTHER THAN		
FO	₹ .	NUMBER	RFILED	NUMBER B	XTRA		RATE	FEE		RATE	FEE
BASIC FEE								345.00	OR		690.00
TOTAL CLAIMS /2 minus 20=						X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS minus 3 = *						X39=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT						[-	+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II							SMALL I	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
E	Total .	. 9	Minus	20	-		X\$ 9=		OR	X\$18=	J
AME	Independent	•	Minus	<i>J</i>	=		X39=		OR	X78=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DEPE	ENDENT CLAIM	.		+130=		OR	+260=	7
					ı	. L	TOTAL		OR	TOTAL	
7-17-03 (Column 1) (Column 2) (Column 3)								<u> </u>		ADDIT. FEE	
ENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	· 13	Minus	. 20	1=		X\$ 9=		OR	X\$1,8=	
AME	Independent	NTATION OF MI	Minus	••• 3	=		X39=		OR	X78=	
	FIRST PRESE	NIATION OF MI	DLIPLE DEPO	ENDERT CLAIM			+130=		OR	+260=	
			•			AC	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
5-	14-04	(Column 1)		(Column 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ĬŽ	Total	. 9	Minus	20	3		X\$ 9=		OR	X\$18=	
ME	Independent	. 2	Minus	 3 ·	=		X39=		OR	X78=	, -
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDENT CLAIM		-				<u> </u>	
	H the enter in eater		ha antru in sat) I No 2 write 10° in ~	dumo 3	L	+130=		OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20." AD							TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											